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November 23, 2004

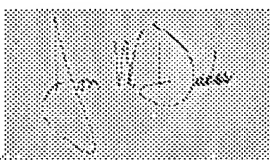
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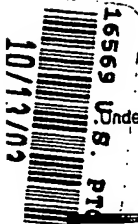
RELATED PCT APPLICATION NUMBER: PCT/US04/33723

Certified by



Jon W Dudas

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## PROVISIONAL APPLICATION FOR PATENT COVER SHEET

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c).

INVENTOR(S)					
Given Name (first and middle (if any))		Family Name or Surname		Residence (City and either State or Foreign Country)	
Michael A.		Lorente		Bloomfield Hills, MI	
<input type="checkbox"/> Additional inventors are being named on the _____ separately numbered sheets attached hereto					
TITLE OF THE INVENTION (280 characters max)					
METHOD OF DETERMINING NERVE PRESSURE LOCATIONS					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number		25006		Place Customer Number Bar Code Label here	
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ENCLOSED APPLICATION PARTS (check all that apply)					
<input checked="" type="checkbox"/>	Specification	Number of Pages	8	<input type="checkbox"/> CD(s), Number	
<input checked="" type="checkbox"/>	Drawing(s)	Number of Sheets	2	<input type="checkbox"/> Other (specify)	
<input checked="" type="checkbox"/>	Application Data Sheet. See 37 CFR 1.76				
METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT (check one)					
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.				FILING FEE AMOUNT (\$)
<input checked="" type="checkbox"/>	A check or money order is enclosed to cover the filing fees				
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: 07-1180				\$80.00
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.				
The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
<input checked="" type="checkbox"/>	No.				
<input type="checkbox"/>	Yes, the name of the U.S. Government agency and the Government contract number are: _____				

Respectfully submitted,

SIGNATURE

*Lionel D. Anderson*

Date

10/13/03

TYPED or PRINTED NAME

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REGISTRATION NO.

50,571

(if appropriate)

Docket Number:

LMAA-10318/01

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P19SMALL/REV05

## METHOD OF DETERMINING NERVE PRESSURE LOCATIONS

### FIELD OF THE INVENTION

The present invention relates to natural healthcare methods for clinically determining nervous system malfunctions and more particularly to a dynamic method for determining nervous systems malfunctions caused by spinal pressure on a nerve branch.

### BACKGROUND OF THE INVENTION

It is appreciated and well understood by healthcare professionals that only nerves feel pain. Neither skin, bones, muscles, nor anything else feels pain unless a nerve is connected to it. All nerves come from the brain, go down through the spine and communicate life-giving messages out to all parts of every living cell in the human body. If a message is altered because of a pinched nerve, then the body falls to a lower state of health and healing which usually results in a person experiencing weakness, pain and, in some cases, disease that stems from the person experiencing chronic nerve pressure.

Traditionally, static methods have been used to evaluate nervous system malfunctions associated with nerve pressure being experienced at various points within the human body. These methods typically require medical health professionals to obtain x-ray photos of a patient and thereafter to review the x-ray photos to determine locations within the body where nerve pressure may be present. However, this x-ray method of static evaluation can sometimes require that the patient be subjected to this procedure many times before the

nervous system malfunction can be properly analyzed or completely treated. Such a result subjects the patient to numerous exposures of potentially cleansing x-ray exposures.

Advantageously, this present invention provides a pioneering method of  
5 determining a nervous system malfunction in a dynamic fashion as illustrated in Figure 2 whereby the inventive method provides a reliable and sufficient indication of what nervous system malfunctions exist within a person such that the need for x-ray evaluations can be substantially reduced and/or minimized. Additionally, this new dynamic analysis directly touching the patient provides  
10 correct and updated information on the patient's changing condition as desired (see Figure 3).

#### DESCRIPTION OF THE INVENTION

The present invention provides a method of dynamically determining nervous system malfunction caused by spinal pressure on a nerve branch  
15 wherein the inventive method provides advantage over traditional static methods of determining nervous system malfunctions.

The method comprises carrying out a series of clinical observations of leg length changes as pressure is applied at four points along the pant leg meridian of a patient. Any resulting leg length change as pressure is applied to  
20 the predetermined points is noted by a healthcare professional performing the evaluation. The total leg length change indicates the severity of the problem by showing greater change in the length of the subject leg corresponding to a more

severe problem, and the rate of change indicating how long the problem has existed.

Pressure point locations that cause leg length changes to occur will also indicate what particular part of the nervous system and/or area may be most affected. A healthcare professional is able to determine that malfunctions are likely in the body parts controlled by the nervous system branch affected at the location of the respective pressure points which are evaluated during the initial series of steps.

Figure 1 illustrates the vertical spine check which quickly and accurately describes this initial series of steps associated with the method of the present invention for determining nerve pressure locations. The vertical spine check is comprised of first having a patient lay down on their back whereby the healthcare professional can evaluate and determine the length of each of the patient's legs and thereafter establish a base difference between the legs. Once the base difference and leg length has been established, the healthcare professional continues the evaluation on the short leg side, or dominant hand side if both legs are even, to find a spot between the hip and navel which references nerves associated with various parts and organs as according to (1) as illustrated in the table and diagram of Figure 1 based on the merit and other proven body system experimentation. Once a proper spot is located, the healthcare professional presses lightly at that point making contact and thereafter notes the change in the patient's leg length in response to that

pressure point application. The change in length is recorded for purposes to be described hereinafter.

Still referring to Figure 1, there is a general anatomical illustration of a patient whereupon various pressure points (I-IV) are identified for assisting the healthcare professional during patient evaluation according to the present invention. Accordingly, the healthcare professional may reference this illustration when performing the vertical spine check.

A next step requires the healthcare professional to follow up the pant leg meridian on the same side of the patient to just under the rib cage to pressure point (II) as illustrated on the anatomical diagram of Figure 1. This pressure point check is done and the leg length change from most recent position is noted and recorded.

The third and fourth pressure points are located and evaluated in a fashion similar to pressure points (I) and (II) described above. Thereafter, the healthcare professional sums all the recorded changes in the patient's leg length to determine quantitative and qualitative nervous system malfunction existing in the patient. By adding the changes in leg length recorded during the total evaluation, the healthcare professional is provided with a strong indication as to the severity of the patient's condition. Negative measurements, or leg shorten may indicate spinal curvatures while the rate of change in the leg length is indicative of the age of the problems that the patient is experiencing.

The next series of steps in the inventive method of evaluating nerve pressure locations is referred to as the horizontal spine check (see Figure 2).

The horizontal spine check comprises the steps of first having the patient lie down in the prone position. Thereafter, the patient's feet are lifted freely while the knees bending and left on the examination table with the healthcare professional compares the difference in the height of the patient's heels as the legs reach a 90 degree angle with the table. The difference is noted and recorded by the healthcare professional.

Next, the healthcare professional adds the number obtained from the horizontal spine check to the total obtained from the vertical spine check to total and complete the method of nerve pressure evaluation in the patient.

The above dynamic evaluations are performed before corrections are made to the patient to reveal where the most significant areas where changes need to occur in response to pressure contacts being applied to the pressure points as referenced by (I-IV) in Figure 1. Accordingly, the healthcare professional is prompted to begin making corrections to the patient at the locations where the most significant changes were noted first. After making the appropriate corrections, the healthcare professional can recheck the patient to determine if the corrections were done properly such that the patient's legs will balance even length if the nervous system malfunction has been corrected.

The foregoing description and figure provides a dynamic method of evaluating nervous system malfunctions in a patient and provides a method desirous over traditional static methods of determining the same. By utilizing the inventive method herein, benefits are realized by both the healthcare professional and the patient whereby the time and cost of providing and

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receiving adequate care and more effective treatment for nervous system malfunctions is effected by performing the above-described steps.

I claim:



## CLAIMS

1           1.     A method for determining a nervous system malfunction caused  
2     by spinal pressure in a nerve branch of a patient, said method comprising the  
3     steps of:  
4           performing a four point vertical spine check;  
5           recording leg length change and rate of change information of the  
6     patient that occur in response to performing the four point vertical spine check;  
7           adding the leg length changes to obtain a total;  
8           performing a horizontal spine check;  
9           recording a difference in leg length noted from performing the  
10    horizontal spine check; and  
11          adding the base obtained from the vertical spine check to the base  
12    obtained from the horizontal spine check to determine an indicator value  
13    wherein said indicator value and said rate of change information are used to  
14    assist a healthcare professional determining the nervous system malfunction  
15    and to provide the healthcare professional with treatment information for  
16    analyzing the nervous system malfunction.

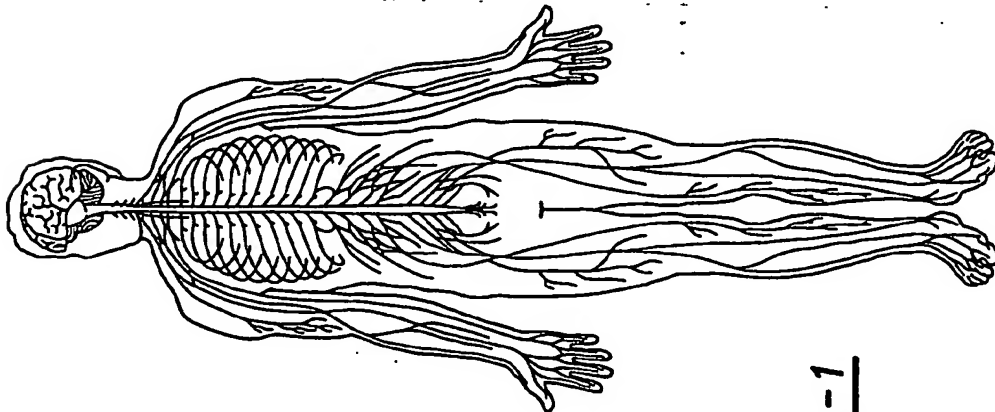
1           2.     The method of claim 1 wherein the horizontal spine check  
2     comprises the steps of:  
3           lying a patient in a prone position on an examination table;  
4           lifting the patient's feet at a 90 degree angle with the tops the patient's  
5     knees in contact with the examination table; and

6           noting and recording the difference in length of the patient's legs as the  
7   legs stand at the 90 degree angle.

1           3.    A method of determining and treating a nervous system  
2   malfunction caused by spinal pressure in a nerve branch of a patient as  
3   described herein.

1           4.    A method of dynamically determining and augmenting  
2   treatment of a nervous system malfunction as described herein.

1/2



**Fig-1**

VERTEBRAE	STRUCTURE, ORGANS AND FUNCTIONS AFFECTED
1 CERVICAL	BLOOD SUPPLIED TO HEAD, PITUITARY GLAND, SCALP, BRAIN, FACE BONES, INNER EAR, SYMPATHETIC NERVOUS SYSTEM
2 CERVICAL	EYES, OPTIC NERVES, AUDITORY NERVES, SINUSES, BONES, TONGUE, FOREHEAD
3 CERVICAL	CHEST, OUTER EAR, FACE BONES, TEETH, TRIFACAL NERVES
1 THORACIC	ARMS FROM THE ELBOWS DOWN, INCLUDING HANDS, WRIST AND FINGERS: ESOPHAGUS
2 THORACIC	HEART, INCLUDING VALVES & COVERING: CORONARY ARTERIES
3 THORACIC	LUNGS, BRONCHIAL TUBES, PLEXUS, CHEST, BREAST
8 THORACIC	SPLEEN
9 THORACIC	ADRENAL AND SUPRARENAL GLANDS
10 THORACIC	KIDNEYS
3 LUMBAR	SEX ORGANS, UTERUS, BLADDER, KIDNEYS
4 LUMBAR	PROSTATE GLAND, MUSCLES OF LOWER BACK, SCIATIC NERVE.
5 LUMBAR	LOWER LEGS, ANKLE, HEEL

2/2

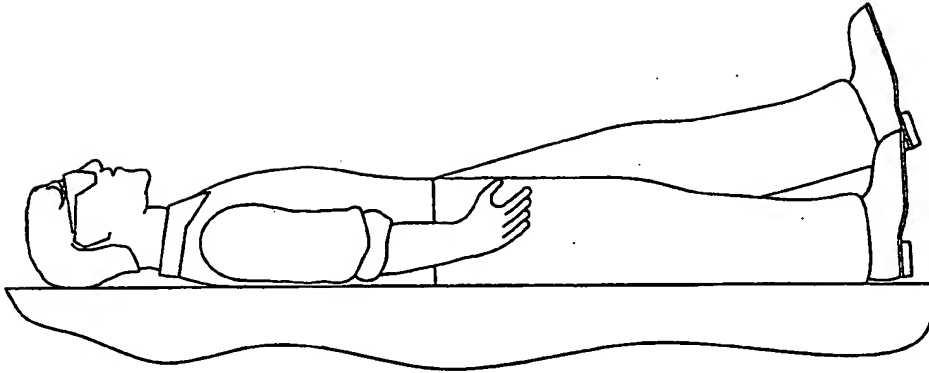


Fig-2

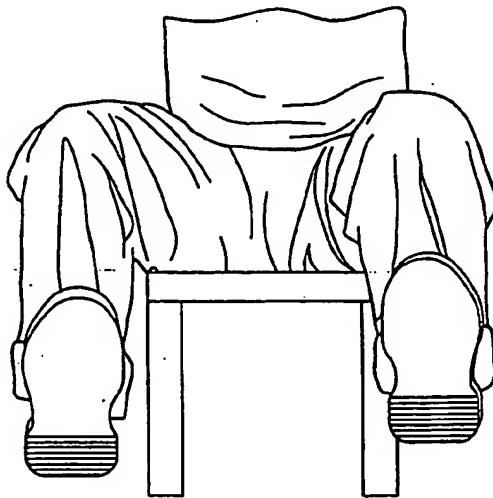


Fig-3

## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	<b>METHOD OF DETERMINING NERVE PRESSURE LOCATIONS</b>
Application Type: provisional, utility Attorney Docket Number: LMAA-10318/01	
Correspondence address: Customer Number: 25006 *25006*	
Inventor Information:  <u>Inventor 1:</u> Applicant Authority Type: Inventor Citizenship: US Name prefix: Dr. Given Name: Michael Middle Name: A. Family Name: Lorente City of Residence: Bloomfield Hills State of Residence: MI Country of Residence: US Address-1 of Mailing Address: 810 N. Pemberton Address-2 of Mailing Address: City of Mailing Address: Bloomfield Hills State of Mailing Address: MI Postal Code of Mailing Address: 48302 Country of Mailing Address: US Phone: Fax: E-mail:	



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